PLEASE PRINT

# STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) **RECEIVED** 

JUL 20 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	LARRY AL	AN		
II. Name of lobbyist's pa	artnership, firm or corpora	tion, if any:		
NAMENWITE M (Name o	UTUAL WSURAY of partnership, firm or corporation	CE COMPANY	AND AFFI	WATES
PD. Box Business Address: (Street)		r/City)	(State)	EleZleS (Zip Code)
860 748-875] (Telephone)	Bdg 23	1-2150 (Fax)	e-mailalan	) nationuide, con
	rs: (Choose one – file separ sactions which are not attri			y file a separate report for
<i>(</i> -	tions occurring in the months			
	MUTUAL MURA Full Name of Client as it appears	S on the Lobbyist Regis	tration Form	FFILLATIES
OR ☐ All reportable transact unrelated to any particula	ions by the lobbyist (including client.	ng the lobbyist's fam	ily), or the lobbying	firm listed below which are
•	April 26, 2017   from date of registration to 3/32	Ju 1/17 activity f	ly 26, 2017 <b>/</b> from 4/1/17 to 6/30/17	
. (	October 25, 2017  ivity from 7/1/17 to 9/30/17	Ja	nuary 31, 2018 🗌 from 10/1/17 to 12/31/	
V. There have been no If this box is checked, con Concord, NH 03301.	o fees received and no re nplete just this form and sub	portable transacti nit it to the Secretary	ons made since the of State's Office, S	he last report.   tate House, Room 204,
VI. Check if additional	-			
	fees or made expenditures, y onorarium or reimbursed exp			
Expense Reimbursement	·			
☐ If you, your firm, or :	your family has made politic	al contributions, you	must file Addendu	m C-Political Contributions
and complete to the best of	nation by Lobbyist A 15-B, RSA 14-C and RSA of of my knowledge and belief.		r or affirm that the f	
(Signature of lobbyist)  LARRY ALI (Print Name of lobbyist)	4N		/ (Dat	e) •

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a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.

b) Total aggregate of expenditures during this reporting period, not reported

c) Total of all itemized expenditures reported in detail in section VI.

in a), of \$25 or less.

I. Name of Lobbyist(s)

# STATE OF NEW HAMPSHIRE

## Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of lobbyist's partnership, firm or corporation, if any:				
NATIONUDE MUTUAL INSURANCE COMPAN (Name of partnership, firm or corporation)	y and Afficiaties			
III. Name of Client N				
IV. Fees Received Indicate the gross amount of all fees received from the client identified abto lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The reduced by any expenses:	pove that are related, directly or indirectly, ment relations, or public relations services			
a) Total of all fees received in this reporting period	a)\$			
b) Total of all fees received this calendar year, prior to this reporting perior (This should equal the total of all prior monthly reports for this calendary).	od b) \$ 1, 312, lar year)			
c) Total of all fees received to date (Add lines a and b)	c)\$ 2,378,			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to fees. Separate reports are to be filed for expenditures made relative to eathe lobbyist(s)/firm that are unrelated to any one client a separate reported expenses are to be reported in one of three categories of expenses: (a) during the reporting period for salaries, benefits, support staff, and officindividual expenses where the expenditure was of \$25.00 or less (for exalunch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being loc) an itemized statement of each individual expenditure made during this any purpose not covered by (a) (for example: purchase of a meal with ceremonial object to be given to the subject of lobbying with a value grestaurant expenses for a legislative reception). Expenses for honoraric contributions will be reported on separate addendums and should not be re-	ach client and if expenditures are made by our may be filed for the lobbyist(s)/firm. In the aggregate total of all expenses paid the expenses; (b) the aggregate total of all emple: meals purchased during a business of less than \$10 that is given to the person obbied with a value of \$25.00 or less); and reporting period of greater than \$25.00 for value of greater than \$25, purchase of a reater than \$25, but not greater than \$50, ums, expense reimbursement, or political			

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ <b>5</b> ,000
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$
f) Total of all expenses year to date	f)\$ 5,000.
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that the foregoing information
(Signature of lobbyist)	July 19, 2017
(Print Name of lobbyist)	
• /	